



CITY OF ST. PAUL
DEPARTMENT OF SAFETY AND INSPECTIONS
375 JACKSON STREET, SUITE 220
ST. PAUL, MINNESOTA 55101-1806

FENCE PERMIT APPLICATION

Visit our Web Site at www.stpaul.gov/dsi

Number	Street Name	St. Ave. Blvd. Etc.	N S E W	Suite/Apt	Building Name	Date
PROJECT ADDRESS						
Contractor (Include Contact Person)		Address City State, Zip+4			Phone	
		(Permit will be mailed to the Contractor's Address)				
Property Owner (Include Contact Person)		Address City State, Zip+4			Phone	
The Fence will be erected on property which is :		Type of Fence (Check all applicable boxes)			ESTIMATED VALUE OF PROJECT	
<input type="checkbox"/> Commercial		Non-Obscuring Fence <input type="checkbox"/> 1 (Chain Link, Rail, etc.)			\$	
<input type="checkbox"/> Residential		Privacy Fence <input type="checkbox"/> 2 (Obscuring)				
Enter # of Dwelling Units >> <input type="checkbox"/>		Barbed Wire Fence <input type="checkbox"/> 3			Estimated Start Date:	
		(For Barbed Wire Fences Only: A Certificate of Insurance is Required Call 651-266-9090 for Insurance Requirements)			Estimated Finish Date:	
Fence Length : (Enter Total Lineal Feet)		Fence Height: Feet Inches		Will the Fence be erected on a corner lot: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Description of Project:						
Applicant certifies that all information is correct and that all pertinent state regulations and city ordinances will be complied with in performing the work for which this permit is issued.					SUMMARY OF FEES	
Applicant's Signature : _____ Date : _____						
For Office Use Only					Permit Fee \$	
Zoning Remarks		(For Barbed Wire Fence Only)	Historical Preservation	Zoning District	Plan Check Fee	\$
		Certificate of Insurance		Property Usage	Total Permit Fee	\$
		Required <input type="checkbox"/>	Required <input type="checkbox"/>	Reviewed By	(For Office Use Only)	
				Date	PERMIT #	
Plan Review Remarks		Reviewed By	State Valuation	Plan Number		
<input type="checkbox"/> American Express <input type="checkbox"/> Discover <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa				Expiration Date: Month /Year >>		
Enter Account Number >>						

Signature of Cardholder: _____

If you are paying for your permit by *American Express, Discover, MasterCard* or *Visa*, you may fax your application.
The credit card information section must be filled in and signed.

Our FAX number is 651-266-9124.

If paying by check, please mail the application and the check to us. Make checks payable to: City of Saint Paul

Effective 01/01/2009

INSTRUCTIONS FOR FENCE PERMITS

FEES

\$37.00 for the first 200 lineal feet or fraction thereof erected and \$13.00 for each additional 100 lineal feet or fraction thereof.

REQUIREMENTS

A site plan drawing must be submitted indicating the following information:

- 1) All lot dimensions.
- 2) Location of the dwelling unit and/or other structures.
- 3) Street and alley locations.
- 4) Location and height of fence segments.

NOTES: Corner Lots must be indicated.
There are special requirements for obscuring fences at intersections.

Barbed Wire fence requires a Certificate of Insurance.
Please call 651-266-9090 for specific insurance details.

Building Inspectors are in the office for inspection requests between 7:30 AM - 9:00 AM, Monday - Friday.
Phone number is 651-266-9002.

To Contact Plan Examiners, call 651-266-9007

Permit Fee Information can be obtained by calling 651-266-9090, Monday - Friday, 7:30 AM - 4:30 PM.

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